



New ☐ Change ☐

User Access Request Form
(For Office Staff/Administrators/Facilitators)
EPR/Gradebook
eSchoolPlus/Cognos
Insight

Learning Management Services

PLEASE PRINT LEGIBLY (complete all sections below as needed):

LAST NAME: _____ FIRST NAME: _____

SCHOOL/DEPARTMENT: _____

CURRENT USERNAME (Employee ID): _____ EPS Employee: Yes ____ No ____

TITLE & POSITION: _____ CONTACT PHONE #: _____

SUPERVISOR: _____ CONTACT PHONE #: _____

Temporary position: Yes ____ No ____ If yes, start and end dates: _____

SECTION A: EPR/Gradebook

To be approved by SUPERVISOR

Elementary Progress Report (EPR) Access Form only needed for office and admin access/printing of EPR.

Yes ____ No ____ **REQUESTING THE ABOVE INDIVIDUAL BE AUTHORIZED FOR EPR Access.**

When will employee be available for training? _____

Secondary Gradebook Access

Yes ____ No ____ **REQUESTING THE ABOVE INDIVIDUAL BE AUTHORIZED FOR Gradebook ACCESS.**

Gradebook Access: Building # (s): _____

Building Administrator: Yes ____ No ____

Attendance: View ____ Edit ____

Student Access for building: Yes ____ No ____

CRC Staff: Yes ____ No ____

When will employee be available for training? _____

SECTION B: eSchoolPlus and Cognos

To be approved by SUPERVISOR

Yes ____ No ____ **REQUESTING THE ABOVE INDIVIDUAL BE AUTHORIZED FOR eSchoolPlus/Cognos.**

1. Please check one below

____ Tier 1 (look only with district access)

____ Tier 2 (look only with building access) – building(s) _____

2. Meal Status Access (Required to also complete Section D)

____ Administrator

____ Counselor

____ Success Coordinator

____ Office Manager

____ Registrar

____ Other Please explain

3. Define Role for management of data

____ Administrator

____ Counselor

____ Nurse/Healthroom

____ Attendance

____ Registration Records

____ Transcript

____ Success Coordinator

____ Specialist

When will employee be available for training? _____

Signatures required on Page 2

SECTION C: Insight (dependent upon user roles, responsibilities and security)

Required to also complete Section D

To be approved by SUPERVISOR

Yes ___ No ___ **REQUESTING THE ABOVE INDIVIDUAL BE AUTHORIZED FOR Insight ACCESS.**

Insight Access: Building #(s): _____ CRC Staff: Yes ___ No ___

When will employee be available for training? _____

**SECTION D: Annual Notification Confidentiality Letter
Disclosure of Student Free and Reduced Meal Status Information**

If employee has read access to Free and Reduced Meal Status this section must be completed.

If employee is able to view Free and Reduced Meal status, an Annual Notification Confidentiality Letter is required (Appendix A).

Please initial the following statement where applicable.

I have given the employee the Annual Notification Confidentiality Letter (supervisor initials) _____

I have received the Annual Notification Confidentiality Letter (employee initials) _____

SECTION E: To be read and completed by SUPERVISOR and EMPLOYEE

Sections A, B, C and/or D to be completed before supervisor signature.

Acknowledgment of Confidentiality and Acceptable Use Provisions

As an employee of the Everett School District #2, I am aware that student and employee data to which I have access must be treated in a confidential manner. I am aware that any breach of confidentiality or abuse of my position may result in disciplinary action. Examples of such data or materials which require confidentiality include, but are not limited to, reports and computer terminal display information. In consideration for the privilege of using and having access to the Gradebook and/or Insight system, I hereby release the Everett School District #2 from any and all claims and damages of any nature arising from my use of the system, without limitation. Further, I have read and agree to abide by the Regulations for Acceptable Use of the Everett School District Network, which I have reviewed and understand.

Supervisor Signature_____
Date_____
Employee Signature_____
Date**SECTION F: OSPI Education Data System (EDS)**

If user requires access to OSPI Education Data System (EDS) roles (such as Attendance, CEDARS, Student Record Data Exchange), supervisor needs to email request to Karen Sullivan, KSullivan@everettsd.org.

SECTION G: To be completed by Learning Management Systems Department

Gradebook Access:	AD ___	CK ___	Other ___	Date entered: _____
EPR:	AD ___	CK ___	Other ___	Date entered: _____
Insight Access:	PD ___		Other ___	Date entered: _____
eSchoolPlus/Cognos:	AD ___	CK ___	Other ___	Date entered: _____
Confidentiality Letter Database:	SB ___		Other ___	Date entered: _____

Director Signature_____
Date**RETURN completed form to LMS Department, CRC, Attn: Forms**



PO Box 2098, Everett, WA 98213
www.everettsd.org

Keep letter for your records.

Date: _____

TO: _____
(employee name)

Regarding: 2016-17 Annual Notification - Disclosure of Student Free and Reduced Meal Status Information

Since you have access to student meal status through one of the Everett Public Schools reporting tools (e.g., eSchoolPlus and/or Insight) and/or Office of the Superintendent of Public Instruction (OSPI) applications, we would like to take this opportunity to inform and remind you of the CONFIDENTIAL nature of student meal status under OSPI Memorandum No. 062-08M – Child Nutrition Services.

The Everett Public Schools Food & Nutrition Services Department and you acknowledge and understand that children's free and reduced-price meal and free milk eligibility information obtained under provisions of the National School Lunch Act (42 USC 1751 et seq.) or Child Nutrition Act of 1966 (42 USC 1771 et seq.) and the regulations implementing those Acts is CONFIDENTIAL INFORMATION. This agreement is intended to ensure that any information disclosed by you about children eligible for free and reduced-price meals or free milk will be used only for the purposes of developing and implementing school improvement plans. You should be aware that this law states that unauthorized disclosures of this information will result in penalties of imprisonment of not more than 1 year or not more than \$1,000 or both and could result in disciplinary action.

Please take extra care in maintaining and protecting students' and parents' rights of confidentiality. All printed lists/documents will be shredded when your work is complete. Until shredding occurs, printed lists/documents will be kept locked in a file cabinet or drawer.

Please do not hesitate to contact Joanna Peeler, Manager, Food & Nutrition Services at x4380 should you have any further questions.

Sincerely,

A handwritten signature in dark ink, appearing to read "Debbie Kovacs", with a horizontal line extending to the right.

Debbie Kovacs
Executive Director
Human Resources
dkovacs@everettsd.org
(425) 385-4101

cc: Joanna Peeler

Keep letter for your records.